File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, lowa 50319 Fax: 515-281-4073

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Reset Form

FOR INSTRUCTIONS. SEE BACK OF FORM

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DISCLOSURE	SUMMARY PAGE

		20101	MAY 17 PI	112: 56
COMMITTEE NAME (Must be same as on Statem	nent of Organization)	_	FORM	· 12- 00
IMPORTANT: Indicate by # type/of committee you are r (1)Statewide/Legislative/Judge Standing for Retention (4)County Central Committee (5)County Candidate (reporting for: 5 Candidate (2)State PAC (3)State Party	(R	DR-2 Rev. 07/2007)	DISCLOSURE REPORT
11) Local Ballot Issue	(10)SCHOOL BOARD OF OTHER PORTICAL SUBDIVISION PAC (1 1	omm. #	
CANDIDATE COMMITTEES ONLY: Candidate Name	Political Party (if applicable)	So	canned	
Office Sought	District (if Senate or House)			
Late reports are subject to possible civil and criminal	penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68	A.401(3), the ca	ndidate, for a
Kelly (oiner)	563-318-6518	_	5-15	- 10
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATES	IGNED
I AM FILING A May 15th (report date)	REPORT FOR (1) ELECTION /(2		ELECTION YE	AR.
• • • •	•			
CHECK IF AMENDMENT TO REPORT DATED	,	ical Com	mittees, enter Da	ite of Election
☐ Check if this is final (termination) report and att (You must continue to file reports until a		ounty & L	ocal Committees tion is held	, enter County in
STATEMENT OF CASH	ON HAND			
CASH ON HAND at the beginning of the reporting committee. This amount MUST be the s of the last reporting period or must be ze	period. (Total of all funds held by the name as the cash on hand at the end to if this is first report filed.)	\$	13,	905.94 640.00
ADD TOTAL MONEY TAKEN IN THIS I			•	
Schedule A: Cash Contributions total (A	attach Schedule A) (*also see in-kind below)		5	640,00
	ch Schedule F)			
Schedule H: Total Sales of Campaign P	roperty (Attach Schedule H)			
(Schedule H applies to Candid	dates' Committees Only)		. ~1	ارم د د د
	_ SUB-TOTAL	\$	19,	545.94
SUBTRACT TOTAL MONEY SPENT TI	HIS PERIOD		•	
Schedule B: Expenditures total (Attach	Schedule B) (**aiso see debts and loans below)			914.90
Schedule F: Loan Repayments total (At	tach Schedule F)			
CASH ON HAND at the end of this reporting period	od (if final report balance must be zero)	\$	18,	631.04
**UNPAID BILLS (From Schedule D - Attach Sch	edule D)	\$		
•	Attach Schedule E)			
	ttach Schedule F)			
CONSULTANT BREAKDOWN (Schedule G Attac			YES	NO
CANDIDATE COMMITTEES ONLY:	•			
VALUE OF CAMPAIGN PROPERTY (From Sche	edule H - Attach Schedule H)	\$		
	npaign account bank statement in January of each	vear.		

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form	A (Rev. 07/03)	MONETARY RECEIPTS
		CK THIS BOX IF

COMMITTEE NAME (Must be same as on State	tement of Organization)
Tennelles des Treasur	ree

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ IF FOR
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK		TO CANDIDATE* (if applicable)	RECEIVED	FUND- RAISER
	NUMBER				INCOME
<i>a</i>	ID#	Margaret Tiarman		\$	
3-10-10	CK#5003	Dovenport Ja 53807-2553		\$100.00	L
	ID#	Michael Gindici			
2-10 10	CK#	2712 8 40 Th		200,00	
3-10-10	CK# 1006	Dave uport La 52804			
	ID#	Robert Martex		100.00	
3-10-10	CK# 2/60	Ballenport Ha . 53807		700.00	
	ID#	Camen Taxas)			
3-10-10	CK# 1203	1917 ATIL SICT		250.00	<u> </u>
	1003 ID#	Molene, W. 61269-6923			
4		Wayne Mostgonery 4232 & 58th St,			
3-10-10	CK#3894	Dovemport for 52807		100.00	L
	ID#	Ray toutation		,	
3-10-10	CK#5207	(389 11) Parky ree De		50.00	
	1D#	Walcott Aa 52773			
ا با م		Mary helgines santzky		. د دسر	
3-10-10	CK# //702	3418 18 18 Ja 52122		50.00	
	ID#	Dean Rock			
3-10-10	CK# 2182	4509 danksvery Ct		50.00	<u> </u>
270-10	<i>8186</i> -	Ducenport La 52807-158	9	- 5,55	
		TO REAL TEUS		50.00	
3-10-10	14068	Dacemont Les 3808. 354	8	<i>₩0.00</i>	
	ID#	D. C. F. Barrett			
3-12-12	CK# 12.146	MAN Kimberly		50.00	L
0 10-10	12.146	Bettenday Ja 52782-410			
			SUB-TOTAL	\$1,000,00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

TOTAL (if last page of this schedule)

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form SCHEDULE

A
(Rev. 07/03)

MONETARY RECEIPTS

CHECK THIS BOX IF

Lennelly for Treasurer	COMMITTEE NAME (Must	be same as on Statement of Organization)
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dennity for marine	dennely	for Masuler

STATE CANDIDATES NOTE: IF ACONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ IF FOR
RECEIVED	(if applicable)	TOTAL FAIR FEBRUARY	TO CANDIDATE*	RECEIVED	FUND-
(MM/DD/YR)	AND PAC CHECK NUMBER		(if applicable)		RAISER INCOME
-	ID#	Paul Burneviter			
	014	4132 N Division		\$	
3-16-10	CK#	Davenport Ja 53806		25.00	
	ID#				
	CK#	12181 St andrews cuche		, , , , ,	L
3-16-10		Bettenderf In. 53723		150.00	
	ID#	Robert Cheyny			
<i>a</i> n . 1	CK#	336 Lunibord ave		100.00	<u> </u>
3-16-10	I ID#	Dovenport La 53803		100.00	
	1	quay deviation			
3-16-10	CK#	Bette noder La 52722		20.00	<u> </u>
9 10 10	ID#	mary knexts			T
	CK#	LINE WHITE (I		_	
3-16-10	ORT	Davenport Ja 53806 368	? 	25.00	
	ID#	Roger gebrer and			
2	CK#	Roger getsen groyal Rd		25.00	L
3-17-10	15#	Tou Charlotte Trise 195		33.00	
	ID#	Douglas Trato			
3.17-10	CK#	Mock Island, \$161204-381	2	100.00	L
91110	ID#	miho mcaloux).	<u> </u>	100.00	
		6327 Paluck Point			
3-17.10	CK#	Roverport da 52807		100.00	L
	ID#	Teven Landauer			
	CK#	201W 2ND Ste 601		2 03 8 20	
3-17.10	/	Davenport La 52801		100.00	
	ID#	Richard Hleine			
1 11.	CK#	6610 garnes kg		25.00	L
3-17-10	<u>′</u>	Bettender fa 52722	CUR TOTAL	00,00	<u> </u>
		<i>,</i> ,	SUB-TOTAL	s 670.00	
		TOTAL (if last page	of this schedule)		
				= W	

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Reset Form

SCHEDULE	
A (Rev. 07/03)	MONETARY RECEIPTS

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CONTRIBUTIONS -- MONEY TAKEN IN (Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)	AMEN
Lennelly for Measurer	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

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RECEIVED (MM/DD/YR)	D.A.T.	L DAG ID MILIMPED	NAME AND ADDRESS OF CONTROL TOD			· · · · · · · · · · · · · · · · · · ·
(MMDD/YR) AND PAC CHECK NUMBER 3.18.10	DATE RECEIVED	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ IF FOR FUND-
NUMBER Sugar Methermatil 3.18.10 CK# 33.458 313 - 34 53 32.500					INLOCIVED	RAISER
3.18.10 CK# Sugar Mellemath 3.18.10 CK# Sugar Mellemath 3.18.10 CK# Sugar Mellemath 3.18.10 CK# Sugar Alsgaria Sugar A	((בוף		INCOME
3.18.10 CK# 34.58 313 4 53.753 25.00 \\ 3.18.10 CK# 38.13.5 32.5 53.753 50.00 \\ 3.18.10 CK# 38.13.5 32.5 53.5 50.00 \\ 3.18.10 CK# 50.00 \\ 3.18.10 CK# 50.00 \\ 3.18.10 CK# 50.00 \\ 3.18.10 CK# 50.00 \\ 10# CK# 50.00 \\ 10# CK# \\		ID#	& She De and			
3.18.10 D# Sie Cenie					\$	
10# Susan Finger So.00	1.0.0	CK#	23458 212-01] ـــــــــــــــــــــــــــــــــــــ
3-18-10 CK# 3813 5 . 333 5 53763 50.00	3.18.10		Le Clave de 52753		25,00	
3-18-10 CK# Seven Septem Septe		ID#	Luce Florer			
3-18-10 CK# Seven Septem Septe		01411	2264			
1D#	2.19 11)	CK#	8/35. 200 7 57753		50.00	
3-18-10 CK# SELLS ST 100.00		100#	Seclare, Ja Colos		30.00	
ID#		10#	Kerry Beyer.			
ID#		CK#	3726 6 1541			
ID#	3-18-10	0	Day 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		100.00	
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		CK#				
SUB-TOTAL OF ADD				SUB-TOTAL	۵۰ صوصت	

TOTAL (if last page of this schedule)

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form	SCHEDULE	
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COMMITTEE	* NIA BAZ /8 /	ha aama aa aa	Cénénanané	t of Ormaninatio	١

Lennelly for Measurer

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FO FUND RAISE INCOM
3-20.10	ID# CK#	Ron May 2322 Kimberly Devenport As. 52807 Ope Shazel		\$ 50.00	
	ID# CK#	4215 E 58 9 St		25.00	
3-20-10	ID# CK#	Davenport In 53807 Tom holderer 513 N Lillmore		25.00	
3-20.10	ID#	Bill Wallace,		200.00	
3-20-10	CK#	5156 Selves Spur Rd Settendar Fa 53732 Leo Kelfor		108.00	<u> </u>
3-20-10	CK#	Davenport Ja. 52806		25.00	
3-23-10	CK#	Vickey Conard 3082 Selmond Rd Bettendorf Ja. 52722		100.00	<u></u>
3-23-10	ID# CK#	Broch Eurnfurtt 1738 & 43.5 Dans port La 52807		100.00	
	ID# CK#	Rob Fich			
3-24-10	ID#	Willel 10 5372		50.00	
3 24-10	CK# ID#	3547 Deere Redge CT Betterdorf La 53732 Lete Pollmann		25.00	L
3.25.10	CK#	Daverport In 53803	SUB-TOTAL	50.00	<u> </u>
		TOTAL (if last page		s 725.00	

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Page 4 of 10

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form	SCHEDULE A	MONETARY
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(including candidate's personal fullus)	CHECK THIS BOX
COMMITTEE NAME (Must be same as on Statement of Organization) Semmellen Las (Results)	AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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	DAG ID MUMPED	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ IF FOR
DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS OF CONTRIBUTOR	TO CANDIDATE* (if applicable)	RECEIVED	FUND- RAISER INCOME
	NUMBER ID#				INCOME
	#עו	Tom Sabular 118 Just Rd		\$	1
3-24-10	CK#	Davenport Sa 52803		50.00	
	ID#	John asnold.			
3-24-10	CK#	Onvenport Ja 53803 Poln Wine St Daverport Ja 53804		100.00	
	ID#	The state of the s			
	CK#				
	ID#				
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TOTAL (if last page of this schedule)

Page 5 of 10

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE	
A (Rev. 07/03)	MONETARY RECEIPTS

CHECK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization)	
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	· 				
DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	ID#	Bon Richman			
4-1-10	CK#	4208 & 58th St Ja 53807		150.00	
	ID#	Ben Vander rich			
4-1-10	CK#	2525 18th Sa 53722		50.00	
	ID#	Kather Wolfe			
4-1-10	CK#	Devenant La 53807		100.00	
	ID#	there servace			
4-1-10	CK#	Daile port La 58807		50.00	
	ID#	see Schneider		ļ	
4-1-10	CK#	3133 Canal Shore DIW.		100.00	<u>.</u>
	ID#	Tom Bush and			
4-2-10	CK#	4124 Glendale alva Davenment Ha 53807		100.00	
	ID#	mike Humee.			
4-2-10	CK#	2711 Cagle Heights Ct		500.00	
	ID#	Nich Marion			
4-2-10	CK#	2170 Hogan Ct La 52722		20.00	·
	ID#	Ool 30 Trik			
4-2-10	CK#	(360) S. 15 Eduice La. 53748		50.00	
	ID#	•			
	CK#				
	1		SUB-TOTAL	s 1 120.00	

TOTAL (if last page of this schedule)

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE	
A (Rev. 07/03)	MONETARY RECEIPTS

CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
4-2-10	ID# CK#	Dan Delkier 4027 Jersey Ridge Rd Dane post La 52807		\$ 100.00	
4-2-10 4-2-10	ID# CK#	Tom Sundeibeuch 2138 W Hayes Ja 53804		100.00	
	ID# CK#	asim signs is , & a costo			
	ID#				
	ID# CK#				
	ID#				
	ID#	·			<u> </u>
<u>.</u>	CK#				
	CK#				
******	CK#				
	ID# CK#				
	-thu-		SUB-TOTAL	\$ 300.00	

TOTAL (if last page of this schedule)

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(for Schedule A)

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
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CHECK THIS BOX
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

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DATE RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR FUND-
(MM/DD/YR)	AND PAC CHECK NUMBER		(if applicable)		RAISER INCOME
	ID#	5917 Esale Ridge Rd		\$	
4-20-10	CK#	Betterdorf In 52722		50.00	
	ID#	MikeVondelaar			
4-20.10	CK#	5831 Eaglehidge Kd. Betterder Ja 52722		100.00	<u></u>
	ID#	Tom Otting 1			
4.20-10	CK#	Bettendor Ja 52722		50.00	<u> </u>
4-20-10 4-20-10 4-20-10 4-20-10	ID#	Jeff Holdtlein Jane			
4-20-10	CK#	Restendent In 52720	 	1000.00	
	ID#	,,			
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	CK#				
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!	CK#				
	<u> </u>	<u> </u>	SUB-TOTAL		

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Page g of 10 (for Schedule A)

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

SCHEDULE Reset Form (Rev. 07/03)

-	
	MONETARY
)	RECEIPTS

AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	DELAFIGNICIUS		
RECEIVED	(if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR FUND-
(MM/DD/YR)	AND PAC CHECK NUMBER		(if applicable)		RAISER INCOME
	ID#	Tom Helme		\$	
4-29-10	CK#	Tom Helme 6502 Stonehaven Ct Davenport As. 53801			
1,24-10	ID#	Queenport La 53807		50.00	
3.6	CK#	Bay Wagner Bd			
4-29-10		Bettender Ja 52722		50.00	<u> </u>
	ID#	Ryan Bielle			
4-29-10	CK#	Doverport to 53806		100.00	
7-0-7-10	ID#	Bollenport Ja 35006	-	100.00	
	CK#				
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	CK#				L
<u> </u>	ID#		·	···	
	CK#		!		
			SUB-TOTAL		, i

TOTAL (if last page of this schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Reset Form

SCHEDULE

MONETARY

CONTRIBUTIONS -- MONEY TAKEN IN

(Rev. 07/03) **RECEIPTS** (Including candidate's personal funds) CHECK THIS BOX IF COMMITTEE NAME (Must be same as on Statement of Organization) AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
5-10-10	ID# CK#	Harold Steinke 2515 W Central Jack Davenport Ha 33804		\$ 100.00	
5-18-10	ID#	Gay Vondehaar 6 Summes Pl Bettendorf Sa 52.722		100.00	
	ID# CK#	7			
	ID#				
	ID# CK#				
7.	ID# CK#				
!	ID# CK#				
			SUB-TOTAL	200 00	

TOTAL (if last page of this schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by

marriage) . If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS.	SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

SCHEDULE	
B (Rev 02/96)	MONETARY EXPENDITURES

☐ CHECK THIS BOX IF AMENDING FORM

Len	nelly.	for Treasurer		·
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (CANDIDATES SEE BELOW & ENTER 1,2,3)	AMOUNT EXPENDED
	ID#	Postmates NW Station	(/)	\$ 4. 1
3-15-10	4/8	Davenport Sowa 52806	. (/ /	\$ 264.00
3-16 10	ID# CK# 420	Results Integrated Marketing In 2018 Strant St. Betlendorf In 52722	(1)	650.90
	ID# CK#		()	
	ID#			
	CK#		()	:
	ID#		· · · · · · · · · · · · · · · · · · ·	
	CK#		()	
	ID#			
	CK#		()	
	ID#			
	CK#		()	
			SUB-TOTAL	\$414.90
		TOTAL (if last page	ge of this schedule)	\$ 914,90

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Campaign funds may be used only for:

- (1) campaign purposes,
- (2) constituency expenses, and
- (3) educational and other expenses associated with duties of office.

Please insert the applicable number in the purpose column for each expenditure.

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 56.6(3)(i).)

Page	 of
•	 _(for Schedule B)